

— QUANTUM PSYCHIATRY — WHERE SCIENCE MEETS SPIRIT

**A 21st century
science of mind
needs to
incorporate the
findings of quantum
physics and
knowledge of non-
physical realities
into the
understanding of
mental health and
mental illness.**

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A fish said to another fish: "Above this sea of ours there is another sea, with creatures swimming in it—and they live there, even as we live here."

The fish replied: "Pure fancy! When you know that everything that leaves our sea by even an inch, and stays out of it, dies. What proof have you of other lives in other seas?"

— Kahlil Gibran, *The Forerunner*

Most psychiatrists regard mental disorder as caused by a disturbance of brain chemistry, a view strongly supported over recent years by advances in the neurosciences. There is also good empirical evidence that psychological stress can initiate changes in brain chemistry. This has strengthened the development of a bio/psycho/social model of mental disorder, in which genetic and dynamic factors combine. Yet the fundamental question of what constitutes 'mind' remains unanswered, for mind has no physical substance.

The general view is that mind is *epiphenomenal*, meaning it is secondary to the function of the physical brain. The brain is thought somehow to generate consciousness. This is not a logical proposition, although it sounds reasonable enough. How can something non-physical be created by something entirely physical? Yet it is an everyday assumption in a world based on the idea of a mechanical, material universe in which the five senses are held to be the only reliable sources of information.

I am going to be arguing against this physicalist view of the world, which started with René Descartes and Isaac Newton 300 years ago. Descartes established the golden rule for empirical science, that nothing would be held to be true unless it could be proved to be true, and Newton laid the foundation of a mechanical universe in which time is absolute and space is structured according to the laws of motion.

From this time, the split between religion and science began to widen. The Church could no longer claim to understand how the universe worked, and the spiritual and physical worlds drifted apart. During the 19th century, the new science of psychology helped redefine the mental world in secular terms. Sigmund Freud (1927) saw religion as a massive defence against neurosis, and even Carl Jung, despite his own spiritual journey, limited himself to defining the soul as "the living thing in Man, that which lives of itself and causes life" (Jung, 1959:26).

Psychiatry is set on proving its bona fides as a science equal to any other, and little attention has been paid to spirituality. Yet a survey carried out by the Mental Health Foundation (1997) showed that over 50 per cent of service users hold religious or spiritual beliefs they see as important in helping them cope with mental illness. They also said they don't feel free to discuss their beliefs with the psychiatrist. I have found that psychiatrists who privately acknowledge the importance of spirituality often feel reluctant to embark on such talk with their patients because it is outside of their training in medicine, psychiatry and also psychotherapy (Powell, 2001).

The impact of the Newtonian world-view has been immense. Our scientific model of the psyche has no place for the soul; there is nothing before birth and nothing after death. Everything has to be understood as arising from within this temporary, physical existence, with the human self the only source of consciousness. We are all separate beings, bounded by the envelopes of our skin and moving around in a fixed, impersonal, three-dimensional universe utterly indifferent to our comings and goings. Little wonder that depression is the ailment of the modern world. In the first five years of Prozac's coming onto the market, over 10 million prescriptions were handed out (Kramer, 1994).

QUANTUM CONSCIOUSNESS

Yet Newtonian science was first knocked off its perch 70 years ago. With the birth of quantum mechanics, the view that our physical world is solid, fixed and independent of mind was shown to be untenable. For example, the famous wave-particle experiment demonstrated that when a beam of light is shone through a single narrow slit, subatomic packets of light, called *quanta*, strike the detector screen like miniature bullets. Change the apparatus to two parallel slits, and the light passing through generates a wave interference pattern, like ripples crossing when two stones are dropped side by side into a pond. Particles become waves, and waves become particles. Both 'realities' have equal validity and cannot be divorced from the observer/participant. Behind wave-particle duality doubtless lies the realm of the *wavicle*. This is just the start, for superstring theory suggests that there are many more dimensions than our local space-time can accommodate.

Electrons are no longer conceptualised as particles spinning around the atom like a miniature solar system. Instead, the electron is smeared throughout the whole of space as a quantum wave, which only collapses as a particle into our physical space-time when a *conscious observer makes a measurement*. Nor can the velocity and position of the electron ever both be known at the same time, for when the quantum wave collapses, there is only a statistical probability that the electron will turn up where it is expected. It may just materialise hundreds, thousands or even millions of miles away. When it does so, it arrives at that place in zero time. *Both space and time are bypassed*. Here are quotes from three eminent physicists:

• "The fundamental process of nature lies outside space-time but generates events that can be located in space-time" (Stapp, 1977:202).

• "Ultimately, the entire universe (with all its particles, including those constituting human beings, their laboratories, observing instruments, etc.) has to be understood as a single undivided whole, in which analysis into separately and independently existent parts has no fundamental status" (Bohm, 1983:174).

• "The universe exists as formless *potentia* in myriad possible branches in the transcendent domain and becomes manifest only when observed by conscious beings" (Goswami, 1993:141).

The quantum realm and the physical universe, which arises out of it, is all one undivided, unitary whole. More extraordinary still, it would seem to be our conscious participation that brings the physical world into being.

When consciousness collapses the wave function into three-dimensional space-time, mind and matter arise simultaneously, like two sides of one coin. The result is what we call *reality*, in both the personal and collective sense. Each one of us is self-aware, since we are connected with the total field of consciousness, and from this individual vantage point we bring about repeated further collapse of the wave function. The process can be compared with how the individual frames of a film flow together to create movement. In this way, we are continually generating what we take to be reality, which we experience both as an internal mental space and all around us in the form of the external, phenomenal world.

The external world is remarkably stable, which gives the impression that it exists quite independently of us. When you return home after a day's work, your house has not gone missing. This is because the probability wave that your consciousness collapses as

you turn the corner, materialising your house for you, has been generated by all conscious beings throughout all time. Short of some unforeseen calamity, your house is still standing there much as you left it.

Yet consider for a moment those rare and unforeseen happenings we call *miracles*. Since the wave function contains (*in potentium*) all that exists throughout all of time, *there is in principle no limit to what is possible*. A mind of unique power can collapse the wave uniquely, in one famous instance turning water into wine.

Quantum effects show up most readily at the subatomic level, but research into large-scale systems (Schmidt, 1987) has revealed that random number generators will, over thousands of trials, show a trend towards high or low, correlating with the mental intention of the experimenter. These studies have been replicated, so we can say with certainty that *mind affects matter*. It has also been demonstrated that experimental subjects who are emotionally attuned can synchronise their brain waves at a distance from each other (Targ and Puthoff, 1974). *Mind therefore influences mind at a distance, be it near or far*.

During the 1970s and 1980s, remote viewing experiments funded by the US military at Stanford Research Institute yielded 'hit' rates of more than a billion billion to one against chance (May 1988).

The mind can 'travel' to distant target sites and report accurately what is to be found there. Precognition has now been firmly established on an empirical basis (Radin, 1997). *The mind therefore operates not only beyond space but also beyond time*.

The efficacy of prayer has been researched (Byrd, 1988), as have more than 150 controlled studies on healing with humans and plant life (Benor, 1992, 2001). *The remote intention of one mind at a distance can promote healing and health in another*.

But there are negative implications to be considered. One military operative in the previously cited remote viewing program blew the whistle on the project when he was coerced into taking part in remote influencing experiments (Morehouse, 2000). It follows that sorcery and witchcraft can no longer be dismissed as working merely through the mechanism of suggestibility.

MULTIDIMENSIONAL AWARENESS

The direct cognisance of other-dimensional realities is, of course, clothed with the projections of the human mind, as the extensive literature on the near-death experience shows (Fenwick, 1995). Yet to attribute *everything* to projection would be to make the same kind of mistake as did the pre-Copernican astronomers, who were convinced that the Sun must surely circle the Earth.

Our problem is that we cannot see the big picture—just like the story of the fish, with which I started. Many of us take it on trust that the ultimate consciousness we call *God* knows what is going on better than we do; at least we are aware of a reality greater than ourselves, unlike the ant that goes about its business oblivious of being watched by the likes of us—or so we think!

What does all this suggest for the practising psychiatrist or psychotherapist? It is not that the neurosciences are invalid, or that developmental psychology has got it wrong. We just have to take care not to mistake the part for the whole. The linear timeline that marks us out from birth to death is but one axis in a multi-axial cosmos. The limits of perception, sight, sound, touch, smell and

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taste do not define what is real. Let us appreciate our special senses for what they are: indispensable tools for negotiating three-dimensional space-time.

The quantum domain has its antecedent in Plato's theory of forms. The difference is that we now have a scientific account of the probability wave and the infinite *potentia* it enfolds. But does this mean that anything goes, that we can all claim to be 'right' about anything and everything?

CONSENSUS REALITY AND THE PARANORMAL

Out of the history of civilisation has emerged what is known as *consensus reality*—a framework of values and judgements in which religion, science, culture and education all contribute to a coherent world-view. We diagnose mental disorders such as schizophrenia and depression not in a vacuum but with reference to this consensus reality. Individually, each person is sovereign over his or her inner world, for good or ill. But one man's truth is another man's delusion, and if we participate in social reality we have little choice but to live with the consensus truths that feed our belief systems. We absorb these belief systems unconsciously, although they deeply influence how we make sense of what we perceive.

Now I want to link the two arenas of consciousness I have mapped out. On the one hand we have the perceptual world of consensus reality; and on the other, the unlimited, beyond-time-and-space function of consciousness, which gives rise to what in the West we call *the paranormal*.

For many people, awareness of the eternal and the boundless remains largely out of sight and out of mind. This is probably for a good reason. Consciousness embodied in the human species is largely occupied with a continuous flux of thought and emotion taken up with the challenge of getting through life, and for most people this is more than enough!

It is as though we have around each one of us a semi-permeable membrane, providing us with a dwelling place for the ego and which delimits the world of sense perception. Without such a boundary, we would merge into unitary consciousness—a case of all waves and no particles! Because the membrane is permeable, we can leave the ego at home and journey beyond space and time. This leads to wholeness or fragmentation, depending on the degree of stability of the psyche. Release from a well-balanced ego through prayer or meditation is one thing. It is quite another to try to hold onto one's identity in the course of a psychotic breakdown. If the membrane becomes porous, there is an uncontrolled outflow of consciousness with a terrifying loss of self. Equally disturbing is the experience of being intruded upon by other energies or entities.

In health, there is a balance to strike between the mind operating as a classical Newtonian instrument obeying the laws of cause and effect, and as a quantum instrument unfettered by space-time and which opens us to paranormal phenomena. In so-called primitive societies, this latter function is used for the therapeutic tasks of healing, divination, soul recovery and spirit release, to name but a few. The spirit world is understood to interpenetrate our own, and the shaman undergoes an arduous training to enable him to enter an altered state of consciousness in which he converses with spirit, be it plant, animal or human, every bit as real as in everyday life (Castaneda, 1998).

Living in industrialised nations distances people from such

experiences. In the UK, for example, the spiritualist movement, which arose in the 19th century, was attacked on a number of counts. The phenomena ran counter to the prevailing scientific culture; nor were they amenable to the research methods of the time. There were a number of fakes who were gleefully exposed and, not least, the spiritual implications were an uncomfortable challenge to the Church. We have had to wait over a hundred years for the right research tools to be developed, aided by new scientific paradigms and daring anthropological fieldwork (Narby, 1998).

Nevertheless, in our society today there are, as always, healers and mediums who are sensitive to other realities. Typically, they suppress this awareness during childhood because they learn it is risky to be known to be different from others. Later, there is considerable relief when they find they are not alone. Psychiatrists get a particular slant on people with such heightened sensitivity. They easily get labelled 'borderline' and their sensitivities are seen as pathological. Perhaps this is not surprising, since the psychiatrist only gets involved when something has gone seriously wrong.

SOUL DRAMAS

When a good few years ago I began working with healers, I could see that there was indeed an overlap with the borderline state, except that the healers were not ill or in mental distress. They had

learned how to tune their sensitivity to what are called *subtle energies* so that they could work in the service of others. Healers also initiated my experience of other times and places beyond the bounds of sense perception. I have written on this topic elsewhere (Powell, 2000), but I will mention briefly how it happened to me, since such things can come as a bit of a surprise if they are not expected.

It was a group meditation, which started with a guided fantasy. We had to imagine ourselves walking in a field in the countryside on a summer day.

Then we were asked to look around until we saw something that attracted us and to go over and take a good look.

I found myself standing before a majestic and mysterious tree. It had the appearance of a giant redwood and soared up into the sky. As soon as I came close to the trunk I began ascending rapidly, as if going up in a fast lift. I shot past the top of the tree and suddenly I was scrambling up a rocky outcrop. Instantly I knew what was going on. This was Arizona, the year was 1848, my name was Tom McCann and I was being hunted down by a raiding party of Apache Indians. I heaved myself up onto the flat top of the rock. I could hear the Indian braves a short way below and I knew they would get to me in a couple of minutes and have my scalp. I pulled out of my pocket a worn leather wallet and gazed for the last time on the picture of my wife and two young daughters. Then I took out my gun, put the muzzle to my head and pulled the trigger. There was no sound and no impact. I simply found myself floating peacefully up and away from the body lying on the top of the rock. There had been no sense of invention or contrivance. The scene had unfolded in real time, and all I could do was go through it as it happened.

The experience can be interpreted in several ways. Was this a soul drama woven from the archetypes of the collective unconscious? Did the theme of loss of loved ones, and of life itself, arise, as with dreams, in response to a problem I had not consciously recognised? If so, then the contents are part of the Self, in Jung's

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meaning of the term. I went on to explore a number of 'other lives' with the help of a Jungian colleague, and there were recurring themes of loss which I could readily identify from my life at the time. This might suggest only the projection of emotions into a number of different scenarios unconsciously selected by me for the purpose. Alternatively, these projections might comprise no less than the working out of one's karmic account, as taught by the Hindu and Buddhist faiths.

Indeed, we now have to take into consideration Professor Stevenson's work on reincarnation, including studies on birthmarks at the site of an injury such as a gunshot wound which had ended the preceding life. The children interviewed had vivid recollections of their former lives and some could accurately identify members of the deceased's family, whom they had never previously met (Stevenson, 1997).

A third and middle way might be to see the scene as summoned from the quantum domain, by means of sympathetic resonance with the person's current psyche. We collapse the wave at the very point where it most powerfully attracts us. It also has a bearing on the question of the continuity of personal identity, so dear to our hearts, beyond this earthly realm! Could it be that once we move entirely beyond space-time—perhaps "the point of no return" reported in the near-death experience—we re-enter the wave and remain suspended in the virtual state until the wave is collapsed by another, superordinate consciousness? Is this where God the Creator comes in? Then we'll get actualised all over again, although we should not be surprised if other worlds await us. Our Father's house has many mansions, we are told.

Out-of-body excursions to other times and places are not advisable for people who have shaky reality testing. On the other hand, symptoms that are inexplicable, such as can be the case with phobias like fear of water, are sometimes resolved with a single session. The scene of the trauma—drowning, for instance—can be revisited, and the therapist enables the client to take leave of the body with release and relief instead of fear and pain.

INFLUENCES FROM OTHER REALMS

The most common mental disorder is depression and it comes in many guises. A young woman came to see me feeling unwell, "not herself". She was clinically depressed, with disturbed sleep and loss of energy and concentration. Antidepressant medication had helped to some extent, but she was still "not herself". I was struck by her use of the phrase.

Going into the background, I learned that, a few months before the symptoms began, a friend of my patient had killed herself in my patient's home, having been staying there while my patient was away on holiday. By the time she got back, everything had been tidied up and the funeral had already taken place.

From a psychological perspective, this tragedy could certainly have affected my patient more than she knew. And yet, as we went on, I felt there was something unexplained here. Thinking of how she had twice said she was "not herself", I asked her if she had the feeling of someone else when she came back home. She replied that she hadn't wanted to mention it in case I thought she was mad, but every time she went into the house she had the strong feeling that her friend was right there in the room with her. She couldn't shake it off; it was almost physical.

One way to receive such information when it is offered is at face value—that, in this case, the earthbound spirit of her friend was still present and probably unable to leave the scene of suicide. We discussed this possibility and I asked my patient if she would like us to invite the spirit of her friend to the consulting room to see if we could get some more information. My patient was willing to try, so I asked her to close her eyes, tune in to her friend and try letting her friend speak through her. It was easily done, and we soon had the details of the suicide.

The spirit of her friend went on to express deep regret at having taken her life. I explained that she could make no progress by staying on and that it was having a bad effect on her friend, who had been generous enough to lend her home to her. She hadn't realised this and apologised. "If only I had known," she said, "what I know now. I was facing the biggest challenge of my life, what my whole life had been leading up to, and I went and messed it all up. I feel even worse than I did before." I said I was sure other opportunities would be given to her. She was very relieved to hear this and we talked for a short while about her hopes for a new life ahead. Then she said she was ready to move on. I asked her to look for the light (which is the first step, and often all that is needed). She looked around, then exclaimed with a smile, "Yes, I can see it!", and left at

once. My patient immediately felt the burden lift from her and she went on to make a full recovery.

Was this a projection of my patient's inner world? I would say both yes and no, since I hold the view that the psychological world is intimately related to the spiritual universe.

My last example summarises a case study by a colleague, Dr Ike Azuonye, which I was delighted to see published in the *British Medical Journal* (Azuonye, 1997). In 1984, a previously healthy woman began to hear a distinct voice inside her head. It said:

"Don't be afraid. I know it must be shocking for you to hear me speaking to you like this, but this is the easiest way I could think of. My friend and I used to work at the Children's Hospital, Great Ormond Street, and we would like to help you." The lady was very frightened by this experience and ended up seeing the psychiatrist, who diagnosed an hallucinatory psychosis and put her on thioridazine. She went off on holiday, but while she was abroad the voices returned, telling her there was something wrong with her and she needed immediate treatment. They gave her an address in London, which she didn't recognise. When she got back, she went to this address and found herself outside the CT scan department of a teaching hospital. The voices told her she had a brain tumour and must have a scan.

The patient was most upset and went back to see her psychiatrist. He examined her thoroughly and there was no sign of any physical abnormality, but, to reassure her, a brain scan was arranged. It showed a mass, which the neurosurgeon said should be removed. The voices told her they were fully in agreement. At surgery, a sizeable tumour, a meningioma, was dissected out. When she recovered consciousness, the voices told her, "We are pleased to have helped you. Goodbye." Twelve years later, the patient remains well. The voices never returned.

Dr Azuonye reports that professional colleagues were divided in their reactions. There were those who thought the patient already

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knew the diagnosis and was making the story up; those who thought the tumour must have produced physical sensations which prompted the patient unconsciously to gather information about the treatment options at certain hospitals; and others who wondered if two well-meaning people, endowed with telepathic gifts, had discovered the tumour and were offering assistance.

Some of us would entertain a further possibility: that these unwelcome voices, which turned out to be an inspiration, came from the realm of spirit. It would not be the first time. A notable instance, one that changed the course of history, took place some time ago. It happened on the road to Damascus.

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